





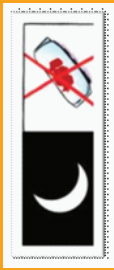












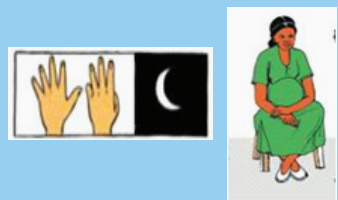
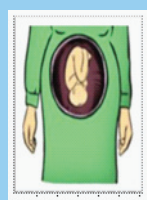
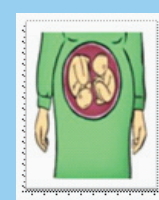

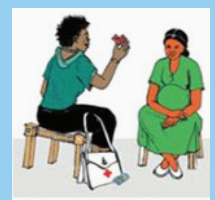


# Prevention of PPH at Home Births in South Sudan

## Home Health Promoter Pictorial Form

1. HHP's Name	2. Village/Health Centre/Unit	3. County
4. Name of the Pregnant Woman	5. Name of the Husband	6. Drug Serial #
 	 	

1 A N C	7. HHP Visiting Homes	8. Woman has No Menstrual Cycle	9. Months that she Had No Menstrual Cycle		10. Education on BP & CR and PPH given	11. Date of Visit
						
						
						
						
	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	

2 A N C	12. HHP Visiting Home	13. Woman is 8 Months Pregnant	14. Single	15. Twins	16. Education on BP & CR and PPH Given	17. Drug Given
						
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
						<input type="checkbox"/> by HHP <input type="checkbox"/> by ANC provider

